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**GENERAL MEDICAL PRACTITIONERS**

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**Beeston Village Surgery Patient Participation Report 2012/2013**

The practice established a Patient Reference Group (PRG) in 2011/2013. This comprises of registered patients and we use our best endeavours to ensure PRG is representative.

The demographics of the practice population are detailed below.

**Beeston Village Surgery – Practice Population**

<b>Age Range</b>	<b>Male</b>	<b>Female</b>	<b>Total</b>
0 - 65	2087	2106	<b>4103</b>
66 - 75	110	107	<b>217</b>
76+	88	123	<b>211</b>
<b>Total</b>	<b>2285</b>	<b>2246</b>	<b>4531</b>

The practice remains proactive in promoting the PRG to the practice population. Notices in English and Polish (due to the large Polish number of registered patients) have been and continue to be displayed as detailed below:-

- On practice notice boards
- On the patient information screen
- Within the local pharmacies most commonly used by patients when requesting/collecting repeat medication
- Practice website (in English and Polish)
- Leaflets passed to patients by front reception desk
- Beeston Library

The key aspects of the PRG is to meet at least quarterly, canvass patient views via a survey, agree an action plan prior to the publication of the survey results on the practice website.

The PRG is currently made up of 6 members of the practice population.

**Member Profile:**

- x 4 male: includes 3 patients in the 0 – 65 age group which also includes one patient of African ethnicity and one patient in the 66 – 75 age group
- x 2 female: includes 1 patient in the 0-65 age group who also has a disability and one patient in the 66 – 75 age group

The PRG clinical representative for the practice is Dr Berridge and the non clinical representative is Kathy Harrison, Practice Manager.

Any members who are unable to attend are kept fully updated of each meeting with agendas and minutes via email.

This is an alternative method of delivery to meet the needs of much of the practice population.

The practice is happy for new members to come forward at any time.

### **Meetings**

The meeting style is fully inclusive and everyone's views are welcome. Members of the Group fed back that they understood this.

The PRG discussed the practice priorities to be included in the local practice survey. The PRG agreed to use the same survey as the previous year. It was agreed this allowed good comparison when the results were collated and subsequently discussed. The survey included 5 sections regarding the following:-

- Access to our services
- Information and Advice
- Quality of Services
- Questions for relatives and carers
- About you

The additional questions to be included in the surgery aimed at helping the practice further improve services within the practice.

The following areas were agreed to be included in details, (please refer to optional questions within the practice survey):-

- Access
- Information
- Quality

### **Collate patient views through local practice survey and inform PRG of the findings**

The practice survey ran over a 2 and ½ week period from 3<sup>rd</sup> December 2012 to 21<sup>st</sup> December 2012.

The Doctors, Clinical Nurse Specialist, Practice Nurse, Clinical Support Worker and staff at the front reception desk were all involved in this process and provided patients with ample opportunity to complete the survey to obtain their views on the selected issues.

The anonymised completed surveys were placed in a tray for collation upon completion of the survey.

The results were collated by our practice secretary. The method used was completion of an Excel spreadsheet with formulary to collate the results.

### **Provide PRG with opportunity to comment and discuss findings of local practice survey. Reach agreement with PRG of changes in provision and matter of delivery of services. Where the PRG does not agree significant changes, agree these with the PCT**

The results of the survey together with the collated findings were circulated by email to the PRG prior to a meeting held on Tuesday 26<sup>th</sup> February 2013 to discuss the results.

The Group were pleased to acknowledge an overall good result from the survey. In particular, the Quality of Services section, number 3.19.1 – 3.19.10 showed very good results.

The PRG view was that the survey was comprehensive but that some of the questions e.g. 1.11, 1.12, 1.13 would only be relevant if they had attended the hospital as an out patient, being in hospital or referred to another healthcare professional e.g. physiotherapist. It was the opinion of the PRG that an option of "not relevant" within the responses would be helpful.

### **2011/2012 Agreed Actions**

The Group were also pleased to note an improvement in points 3.19.4, 3.19.3 and 2.15.3 which formed last year's action plan.

### **2012/2013 Survey**

Following discussions, the PRG proposed the following as identified areas of improvement:-

**Action 1 (3.19.4)/(3.19.3)**

Despite the overall improvement in this year's survey the Group felt it important to continue to promote the use of the interview room for all patients wanting a discussion with the receptionist and to continue training to develop soft skills of improved communication / behaviour within the team when dealing with the public.

**Action 2 (2.15.5)**

Discussing the Information and Advice results revealed that 11% of patients who completed the survey were unaware of our Clinical Nurse Specialist.

It was agreed to increase the profile of our Clinical Nurse Specialist and her role within the practice.

**Action 3 (2.15.4)**

Discussing the Information and Advice results revealed that 26% of patient who completed the survey were unaware of the practice website.

It was agreed to increase the profile and functionality of the website amongst the practice population - [www.beestonvillagesurgery.co.uk](http://www.beestonvillagesurgery.co.uk)

**Agree with PRG an action plan setting out priorities and proposals arising out of the local practice survey. Seek PRG agreement to implement changes and where necessary inform the PCT.**

The following action plan was agreed within the PRG from priorities and previously discussed:-

**Summary of Action Plan****Action 1**

Continue ongoing staff training regarding confidentiality and promote the use of the interview room for the benefit of our patients on all suitable occasions. Consolidate training to develop improved communication within the team when dealing with the public.

**Action 2**

It was agreed to increase the profile of our Clinical Nurse Specialist and her role within the practice.

**Action 3**

It was agreed to increase the profile and functionality of the website amongst the practice population - [www.beestonvillagesurgery.com](http://www.beestonvillagesurgery.com)

**Publicise the local Patient Participation Report on the practice website and update the report with subsequent achievement**

The PRG report and survey findings are published on our practice website [www.beestonvillagesurgery.co.uk](http://www.beestonvillagesurgery.co.uk).

Beeston Village Surgery is open Monday to Friday 8am – 6pm. Our services can be accessed via telephone, in person at the surgery, safe haven fax or through our generic email address of [info.bvs@nhs.net](mailto:info.bvs@nhs.net). Out of Hours care is currently provided by the Yorkshire Ambulance Service and Local Care Direct. The contact number is **111**. This is a free phone number from mobile and landlines.